

The tuning-fork vibrating in contact with the forehead or teeth is heard only on the healthy side, in direct opposition to the cases in which loss of hearing is due to defective conductivity in the ear, and in which the tuning-fork is heard more distinctly on the affected side.

In the *second class* of patients the loss of sensibility of the ear corresponds, as a rule, to that of the body in general. A common form consists of analgesia, with thermo-anæsthesia and diminution of tactile sensibility. The tympanum of the affected ear may be touched without producing any unpleasant sensation, the touch being only faintly perceived, and being followed by no reflex. The air douche produces a slight sensation. The degree in which the hearing is affected varies within certain limits, but has been found lessened in every case examined. In some of these cases a diminution is found in the hearing for sounds conveyed by air, and a diminution or loss of hearing for sounds conveyed by the bone. In the *third class*, in which the anæsthesia is total, the completeness of the anæsthesia is rarely the same on both sides, a common form being hemianæsthesia on one side, and analgesia on the other. The degree of deafness always corresponds to that of the anæsthesia. Attention is called to the uniformity with which deafness for sounds conveyed by the bone exceeds that for sounds conveyed by the air, and the explanation offered that this is probably due to the fact that the vibrations conveyed to the ear by the air are better adapted for the irritation of the peripheral auditory apparatus than those conveyed by the bone. When, then, the receptive power of the auditory centres is lessened, as is probably the case in the hysterical patients, the hearing for sounds conveyed by the bone disappears before that for sounds conveyed by the air. An analogous condition exists in the aged. When the phenomena of transfer are observed the hearing as well as the general sensibility of the deep parts of the ear improves on one side (allowance being made for accidental lesions in the ear itself) in exactly the same degree in which it disappears on the other.

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MICROCOCCHI IN CEREBRO-SPINAL MENINGITIS.—Prof. Leyden recently exhibited (Verhandlung. des Vereins f. innere Medicin, Berlin, Feb. 19th) specimens of micrococcus stained with fuchsin, and obtained from the cerebro-spinal fluid, taken from the body in a fresh state in a case of sporadic cerebro-spinal meningitis. These organisms are characterized by a distinctly oval form, usually united in pairs (diplococci) or more rarely in little chains (streptococci). They resemble greatly the micrococci of pneumonia and of erysipelas, and yet differ somewhat from these forms. The writer refers to the fact that Klebs and Ebarth found micrococci in the arachnoid fluid in cases of meningitis and pneumonia. The case represents an independent primary cerebro-spinal meningitis which began with otitis on both sides. The differentiation between the putrefactive micrococcus and the specific micrococci is not difficult

after a little practice. The meningitic micrococci exhibit movement, but not the lively movements of the putrefactive micrococci. They show a peculiar tremulous motion already described by Ebarth, and also by Gunther in the pneumonia micrococcus. Prof. Leyden stated that it would be of the greatest interest to determine whether this form of otitis was not dependent on the same parasitic micrococcus.—*Deutsch med. Wochen.*, Apr. 4, 1883. S. 206.

SOME STATISTICS OF CHOREA.—Dr. Angel Money (*Brain*, Jan., 1883). Total number of cases collected, 236. *Sex*: cases available, 214; males, 52; females, 162. *Age*: cases available, 186; 4 yrs., 1; 3 yrs., 5; 6 yrs., 6; 7 yrs., 15; 8 yrs., 13; 9 yrs., 20; 10 yrs., 21; 11 yrs., 20; 12 yrs., 15; 13 yrs., 17; 14 yrs., 10; 15 yrs., 13; 16 yrs., 9; 17 yrs., 6; 18 yrs., 5; 19 yrs., 3; 20 yrs., 6; 21 yrs., 1; 22 yrs., 6; above 22 yrs., 14. *Number of attacks*: cases available, 197; 1 attack, 131; 2 attacks, 46; 3 attacks, 15; 4 attacks, 1; 5 attacks, 1; more than 5 attacks, 3. *Month of the year when first observed*: January, 30; February, 16; March, 23; April, 27; May, 20; June, 25; July, 11; August, 11; September, 11; October, 17; November, 16; December, 17. *Cause assigned*: cases available, 214; fright, 60; accident, 13; hard school-work, 9; anxiety and worry, 6; imitation, 2; want of food, 2; exposure, 1; sore thumb, 1; no assignable cause, 120. *Heredity*: cases available, 214; rheumatic history, 28; chorea, 14; "fits," 6; rheumatic gout, 5; gout, 21; megrim, 21; epilepsy, 21; convulsions, delirium tremens, imbecility, "head-affection," drunkenness, each, 1. *Rheumatism*: cases available, 214; history of genuine rheumatic fever, 33; of "rheumatism," 23; doubtful rheumatic history, 9. *Heart-disease and so-called functional murmurs*: cases available, 168; real heart-disease, 31 (13%); mitral disease, 29; aortic regurgitation, 2; systolic murmur, 64 (23%); this was apical in all but 11 cases. Heart-disease preceded by chorea in 7 cases; doubtful in 18; after chorea in 1; age, 5 to 10 years in 12 cases of heart-disease; 11 to 15 years in 12 cases. *Starting-place*: right side, 33 times; left, 30. It was worse on the right side, 55; on the left, 49; hemichorea, right, 3 times; left, 4 times; in right hand, 6; right arm, 6; left hand, 6; left arm, 6; right leg 1; left leg, 2; left face, 2; right arm and leg, 3; left arm and leg, 1; head, 3; speech, 2; legs, 1; arms 1; speech and hand, 1. When the disturbance of motion starts unilaterally in a particular region, it will travel over the whole of that one side ere it pass to the opposite side. *Duration*: in 19 cases, 1 month; in 66, 2 months; in 33, 3 months; in 18, 4 months; in 7, 5 months; in 9, 6 months; in 1, 8 months; in 5, 1 year; in 4, 2 years; 1 in 3 years; in many years, 5. *Interval between relapses*: in 51 cases with one relapse, 5 times the interval was less than 6 months; 5 times, 6 months; 13 times, 1 year; 15 times, 2 yrs.; 3 times, 3 yrs.; 5 times, 4 yrs.; once, 6 yrs.; twice, 8 yrs. In 18 cases of a second relapse, 3 times the interval between the 2d and 3d attack was